	PATENT A	PPLICATION	FEE DE	D	Application or Docket Number							
	FAILITA	Effective	_	69/476799								
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FO	R	NUMBER	NUMBER FILED		NUMBER EXTRA		ΓE	FEE	i	RATE	FEE	
BAS	SIC FEE	1 to					345.00		OR		690.00	
TO	TAL CLAIMS	35	minus 20= * 15			X\$	X\$ 9=		OR	X\$18=	270,50	
IND	EPENDENT CL	AIMS 9	9 minus 3 = : 6			X39=			OR	X78=	468.00	
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=	102.0		
* If the difference in column 1 is less than zero, enter "0" in column 2							AL		OR	TOTAL	1429.00	
CLAIMS AS AMENDED - PART II										OTHER		
10	75(0.5 (Column 1) (Column 2) (Column 3)									OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 11	Minus	<del></del> 35	= /	X\$	9=		OR	X\$18=		
ME	Independent	V	Minus	9	=	Х3	9=		OR	X78=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+13	0=		OR	+260=	,	
						T	OTAL.		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)					ADDIT	FEE		, , ,	ADDIT. FEE		
SNT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DM	Total	• 5	Minus	·35	= /	X\$	9=		OR	X\$18=	. =	
AMENDMENT	Independent	· 3	Minus	··· 9	=/	ХЗ	9=		OR	X78=		
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+13	n_		OR	+260=		
						•	OTAL.		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)								1 ~. ,	ADDIT. FEE		
NT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MENDMENT	Total	•	Minus	**	=	X\$	9= ·		OR	X\$18=		
MEN	Independent	•	Minus	***	=	ХЗ	 9=			X78=		

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL ADDIT. FEE OR ADDIT. FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

lor

OR

+260=

TOTAL ADDIT. FEE

+130=